

**LIE REVIEW FORM  
(CHECKLIST)**

Application SN 09/163588

LIE name Dexter

Complete review by (date): \_\_\_\_\_

No deficiencies found for this application

**B**

**H**

No evidence of appeal conference

Filing Date of Brief 1-23-02

Filing Date of Reply Brief(s) 5-13-02

Filing Date of Request for Oral Hearing \_\_\_\_\_

Uncollected Fees for \_\_\_\_\_ Paper No. \_\_\_\_\_

Translations missing:

Only abstract provided:

Missing references:

Incomplete references:

Missing papers (paper name and date)

OTHER